

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number  10/576,297
	Filing Date  March 8, 2007
	First Named Inventor  Matti Korpela
	Art Unit  1797
	Examiner Name  Brian R. Gordon
	Attorney Docket Number  150026.471USPC

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

**OR**

I hereby appoint the practitioners at Seed IP Law Group PLLC, Customer Number: **00500**

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number **00500**

**OR**

<input type="checkbox"/> Firm or Individual Name			
Address			
City		State	Zip
Country			
Telephone		Email	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

As assignee of record of the entire interest I/we hereby elect, under 37 CFR 3.71,  
to prosecute the application to the exclusion of the inventor(s).

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	<i>23/06/14</i>
Name	<i>Matti Korpela</i>		
Title and Company (Assignee)	<i>President</i> BioControl Systems, Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below.

\*Total of \_\_\_\_\_ forms are submitted.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Rev.POAs(2).DOC